## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

T-6265

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
		CLAIMS A	Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			19					RATE	FEE	7	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			<i>Į Ŷ</i> mir	nus 20=	* Q			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			e mi	nus 3 =	* d			X43=		OR	X86=	
ML	LTIPLE DEPEN	DENT CLAIM P	RESENT					+145=		OR	+290=	
*  f	the difference	in column 1 is	less than zero, enter "0" in column 2				ļ	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAINA	=	Ī	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENT	CLAIM		Ī	+145=		OR	+290=	
								TOTAL	-	OR	TOTAL	
		,	ADDIT. FEE		On	ADDIT. FEE						
		- ا										
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	IRST PRESENTATION OF MULTIPLE DEPENDENT		CL AINA	=		X43=		OR	X86=		
THOS FREDERIATION OF MOLTIFLE DEFENDENT CLAIM								+145=	1	OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			NODII. PEE		,	ADDII. I ELI						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	:	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43= .		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	······································	OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL DDIT. FEE			TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	ADDIT. FEE	
		ber Previously Paid					r four	nd in the app	ropriate box	in col	umn 1.	